

TOWN OF WESTFORD HUMAN RESOURCES DEPARTMENT 55 MAIN STREET WESTFORD, MA 01886

Phone: (978) 399-2915 Fax: (978) 399-2571

Email: hr@westfordma.gov

APPLICATION FOR EMPLOYMENT

Please type or print clearly in ink

Personal Information					
1.	Job Applying For:				
2.	Name:LAST FIRST MIDDLE INITIAL				
3.	Address:				
1.	Telephone Number(s):				
5.	Have you ever previously been employed by the Town of Westford? Yes: No:				
	If yes, please provide name of department, position and dates of employment:				
	Are you prevented from lawfully becoming employed in the United States because of visa or immigration status?				
	If you are not a United States Citizen, proof of immigration status may be required upon employment.				
	I understand that any offer of employment is conditioned upon the satisfactory completion of the verification process as required by the Immigration Reform and Control Act of 1986, and that the Town will only hire those individuals who are legally authorized to work in the United States and who present acceptable proof of their legal right to work in the United States.				
	Education				
7.	a) Did you graduate from high school or obtain a GED? Yes: No:				
	h) If so name of school:				

	If you have a higgranted:			•		
c)	List any colleges, business schools or technical schools you attended:					
	Name of School	Location	Course/ Major	Date Attended	Degree/ Certificate	
d)	and location w	special courses, work-training was given or of hours weekly and other	, list certificates ach	nieved, dates atte	ended, subject of	
9. T	re you available? imes available? ays of the week av	Days;	Part-timeEvenings			
		Emplo	oyment History			
		sent job, or if not currentl part-time work, military s	service and summer j	obs during the pa	ast ten (10) years.	
ar U	se additional pape	er if necessary. Jobs held a rou are applying for.	more than ten (10) yea			
ar U re	se additional pape elevant to the job y		·	******	******	
ar U re ****	se additional pape elevant to the job y	ou are applying for.	********			
ar U re ****	se additional pape elevant to the job y	ou are applying for.	********			

Reason for Leaving:						
**********	**********************					
Starting Date:	Ending Date:					
Name of Employer	City / State					
Job Title:						
Work Duties Performed:						
Reason for Leaving:						
**********	*********************					
Starting Date:	Ending Date:					
Name of Employer	City / State					
Job Title:						
Work Duties Performed:						
Reason for Leaving:						
**********	*******************					
APP	PLICANT'S ACKNOWLEDGMENT					
PLEASE READ CAREFULLY	BEFORE SIGNING THIS EMPLOYMENT APPLICATION.					
	and complete to the best of my knowledge. If this application leads to e or misleading information in my application or interview may result					
I HEREBY ACKN	NOWLEDGE THAT I HAVE READ THE ABOVE ATEMENT AND UNDERSTAND IT.					
Signature of Applicant	Date					

Please email completed Application for Employment to:
https://www.ncbe.nih.gov or fax to 978-399-2571

Applicants are encouraged to also attach a resume and cover letter.

The Town of Westford is an equal opportunity employer.